

Affidavit of Support

**Center for International Education, Central Connecticut State University,
1615 Stanley Street, New Britain, Connecticut 06050**

This document must contain all the appropriate signatures and notarizations before an admitted student may be issued a Form I-20 from Central Connecticut State University.

Affidavit must be dated within six (6) months of the student's intended date of enrollment. Monetary amounts must be stated in US dollars.

DECLARATION OF FINANCES FOR GRADUATE INTERNATIONAL STUDENTS

Central Connecticut State University (CCSU) is required by the United States Immigration and Naturalization Service to assure that all applicants are able to pay all charges and living expenses while studying at CCSU. The following amount must be proven for issuance of a Form I-20.

Tuition and Fees	\$ 16,171
Living Expenses	\$ 11,311
Other (Personal)	<u>\$ 4,024</u>
Total	\$ 31,506

If you are bringing immediate family with you (spouse or children), you will be required to show an additional \$6,000 per dependent. Example: including one (1) dependent - \$37,506; including two (2) dependents - \$43,506.

Student Information

Student's name: _____
Family (Last) First Middle Initial

Student's home country address: _____

Student's present address: _____

Student's present phone and email: _____

Country of birth: _____ Date of Birth: ____/____/____
(month/day/year)

Country of citizenship: _____

Country of permanent residence: _____

Last U.S. institution attended and date of completion (if applicable):

Be sure to complete both sides of form.

Statement from Sponsor

I, _____ do swear that I will make available to
(sponsor)
_____ a total sum of \$US _____ (see page
(applicant) (dollars)
one for total cost) for each year of study at Central Connecticut State University. This money is in addition to any passage money needed for return to the country of origin. I understand that Central Connecticut State University will not be able to assist the student financially. I, the undersigned, realize that I am fully responsible, and will be held accountable by the University for maintaining the terms of this statement. My relationship to the applicant is _____.

Sponsor's Signature

Date

Stamp/Signature of Notary Public
Government Official

Sponsor's address: _____

Sponsor's phone and email: _____

Statement from a Bank or Financial Establishment

This is to certify that _____ whose signature appears
(sponsor)
above, has on deposit with this institution \$U.S. _____ and that the
(enter dollar amount)
information furnished by the sponsor regarding availability of funds is accurate.

Signature of Bank Official

Title of Bank Official

Name of Bank
(Place Official Bank Seal Below)

Address of Bank

Date